



CHILD WELFARE SERVICES STRATEGIC PLAN UPDATE

March 2000

County of Orange

Social Services Agency

Larry Leaman, Agency Director

Michael Riley, Children & Family Services Director

Prepared by
Orangewood Children's Foundation
Daniel McQuaid, Independent Consultant
Dennis Berg, California State University, Fullerton

CHILD WELFARE SERVICES STRATEGIC PLAN UPDATE

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CHILD WELFARE SERVICES STRATEGIC PLAN UPDATE:

Insuring Safe, Nurturing and Permanent Families for Orange County Children.

Executive Summar

1998 RESOURCE AND SUPPORT SERVICES STRATEGIC PLAN UPDATE: Elements Implemented

- The County purchased the Intermediate Care Facility in Orange.
- Foster parents have been given more support in areas of training, day care, supervised parental visits and increased reimbursement.
- Specialized programs were established for severely emotionally disturbed children and siblings.
- Family preservation and support services have been enhanced.
- Collaborations with the Health Care Agency, Probation, Education and Regional Center have been expanded.

The number of children not able to safely live in their own homes has continued to grow unabated and is projected to grow 54 percent in ten years. Investments today in strategies to prevent and/or reduce out-of-home care can lower future County costs and infrastructure needs.

- Orangewood Children's Home is no longer the single portal of entry into custody and emergency shelter. Instead, the evolving child welfare system has multiple entry points and tailors services to meet the unique needs of each child and family at various points of care.
- Additional community resources need to be added to support families so that available services are not quickly saturated.

CHILDREN IN OUT- OF-HOME CARE: Growth Threatens to Overwhelm Future Resources and Services

ORANGEWOOD CHILDREN'S HOME: Population Significantly Reduced

- The average daily population of Orangewood (capacity 235) steadily declined from 279 children during July 1998 to an average of 103 during the last six months of 1999.
- The commitment of additional resources, procedural changes and recent state regulations reduced the average number of days children stay at Orangewood. Shorter length of stay is the primary driver of the lower OCH population.

- During 1998/99, a monthly average of 4,086 children could not live safely with their birth families and were placed in out-of-home care with relatives, county licensed and Foster Family Agency (FFA) certified foster homes or group homes.
- County children in out-of-home care increased 32 percent in the last five years and an added 2,798 children are projected in next ten years.
- More children are being placed in out-of-home care with an alternative family (a relative, foster family or guardian) who

need accessible enhanced services and support.

- Specialized treatment programs, such as higher-level group homes and therapeutic foster homes, are needed to provide stabilization, treatment, crisis and respite care, and transitional services.

CHILD ABUSE REPORTS DOWN -- SERIOUS ABUSE REMAINS CONSTANT: Demand Remains Stable for More Moderate and Severe Incidents

- During 1998/99, 25,312 children were reported abused and neglected in Orange County, representing a 25 percent one-year and 40 percent five-year decline.
- The number of referrals for serious abuse remained relatively stable with the Agency's social workers filing 2 percent fewer Juvenile Court petitions than the prior year.
- Families who needed intense intervention, either voluntary or under court supervision, increased 20 percent.

NEW CHALLENGES & FUTURE DIRECTIONS: Legislation and Reform Impact Services

- The Agency's Children and Family Services division has embraced the "Best Known Practices" principles of strength-based, family-centered, community-based and culturally competent services.
- The Adoption and Safe Families Act mandates giving children the opportunity to grow up in safe and permanent family. The Foster Care Independence Act provides special help for youth leaving foster care up to age 21.

- SSA's intensified effort to develop permanent families for children in out-of-home care resulted in 374 children being adopted in 1998/99, 44 percent more than the prior year.

NEW AGENCY PROGRAMS AND INITIATIVES: A Fuller Array of Innovative, Integrated and Family Based Services Implemented

- The Agency has implemented the first phase of Structured Decision Making, a state sponsored, research based, safety and risk assessment and intervention model.
- SSA's Concurrent Planning Process enables social workers to plan for family reunification and termination of parental rights simultaneously.

Implementation of a comprehensive placement resource and support services plan will require strong County leadership, a public and private concerted effort, a prudent long-term investment in all our children and families, and the development of a full spectrum of flexible, integrated resources and services.

- SSA is developing a Wraparound Services Plan that allows flexible use of State funds to provide a wide array of family-centered services as an alternative to a group home placement.
- The Placement Coordination Program provides a 7 day a week capability to quickly move children into permanent homes or other appropriate

placements.

- The Continuing Care Placement Units co-locate County mental health and SSA staff who jointly provide services to severely emotionally disturbed children.
- The County has invested in new and expanded contract services focused on prevention, risk assessment, family maintenance, out-of-home care diversion and transitional services. Many of these "contracted out" services are provided directly in the family, substitute family, or group home in order to maximize access,

responsiveness and individualized support.

FIVE KEY STRATEGIES for CHILD WELFARE SERVICES IN ORANGE COUNTY

One: Orange County should expand child abuse prevention and family support services developed by a public & private partnership and delivered via a Network of Family Resource Centers.

The Child Abuse Prevention Plan adopted by the Board of Supervisors in March 2000 is a comprehensive countywide plan. It includes a blueprint for developing a network of Family Resource Centers.

Two: Orange county should integrate “Best Known Practices” into all aspects of the services for abused children and their families.

Best Known Practices are built on a foundation that is family centered, strength based, community based, and culturally competent. An array of flexible services that create a new outcome focused relationship with the families being served will be required.

Three: Orange County should continue to support the expansion of services for relative, foster and adoptive families. Assistance should be increased for the transition of youth from foster care to independent living.

The Agency's recruitment, support and retention of foster parents can be enhanced by further expanding mileage and childcare reimbursement, respite care, supervised birth parent visitation, transportation services, specialized training and insuring priority access and care of children needing physical, mental health, drug and developmental services. Additional services such as transitional housing should be developed for youth transitioning to independent living.

Four: Orange County should further enhance specialized treatment programs for emotionally and behaviorally troubled children in order to divert, stabilize and/or transition their placement in out-of-home care.

The changing role of group homes in a family-based system of care compels service providers, with the assistance of SSA, to evaluate their strategic roles and opportunities. Program changes and expansions may include targeting services for specific populations, intensifying levels of group home care, offering a wider array of services, integrating program components and/or forming alliances with other agencies.

Five: Orange County should plan for flexible, “right -sized” facilities to accommodate uncertain future needs.

USMCAS, Tustin The 1998 Strategic Plan proposed construction of a four acre Family Campus with ten homes and a multipurpose building for children under the age of six and sibling groups. Current data demonstrates the need for this site to initially shelter thirty to forty children. A more flexible configuration for the Tustin Family Campus is now recommended that meets the initial need but also allows for other interim uses such as family visitation, specialized childcare, assessment and training. This site could be operational by the end of 2002.

USMCAS, El Toro Changes are recommended to the timing, size and type of facilities identified in the 1998 Plan. The development of services should be delayed from 2005 to 2008. The initial construction phase could include a fifty bed emergency intake facility and a variable use facility for severely emotionally disturbed children, an independent living program facility or other service programs. The speed and frequency of demographic, social, legislative, and other changes will require periodic reassessment of these proposed uses of the El Toro site. After 2010, the thirty acre site can be further developed in response to needs identified in the future.

1. INTRODUCTION AND BACKGROUND INFORMATION

Social Services Agency Vision Statement:

*Orange County residents
will enjoy a safe and
supportive environment
that promotes stability and
self-reliance*

Agency's Mission Statement:

*The Social Services
Agency is comprised of
dedicated, caring, efficient
staff whose mission is to
deliver quality social
services that are
accessible and responsive
to the community,
encourage personal
responsibility, strengthen
individuals, preserve
families, protect
vulnerable adults and
children, and recognize
cultural diversity. We
succeed in our mission
through encouragement
and respect for our
clients, partnerships with
the community and a
commitment to innovation
and excellence in
leadership.*

In order to protect and care for the changing needs of Orange County's vulnerable children and their families, the Social Services Agency is undertaking a number of strategic initiatives to restructure its organization, further develop its practices and more flexible, family centered, community based resources.

Many new challenges and opportunities are now present that were not foreseen just a couple of years ago. The strength and depth of the recent economic surge and the rollout of CalWORKs' has dramatically changed public welfare in Orange County. With major federal, state and county shifts being made in policies, resources and program strategies, significant changes in the local child welfare services system can be expected to accelerate. New resources, though tenuous, provide opportunity for significant new family strengthening and preventative services. Many of the new strategies and innovative programs that can produce significant results have already been implemented or are in advanced planning stages.

This update significantly broadens the focus of the 1998 Child Welfare Services Strategic Plan and will identify many of the Agency's recent internal changes, external factors, new strategies and choices. These elements are in alignment with the Social Services Agency's new vision and mission statement that provides clear direction for current and future action plans well into the new millennium. The Agency has also embraced the values found in the Best Known Practices that are guided by the principles of strength-based, family-centered, community-centered and culturally competent services and methods.

Review of 1998 Strategic Plan

The 1998 Placement Resources and Support Services Strategic Plan, completed a year and a half ago by the Social Services Agency, presented a blueprint for a system of emergency shelter care resources that would be adequate and appropriate to serve Orange County's abused children to the year 2010. It had been expected that the number of children entering shelter care and the number of children in out-of-home care on an annual basis would continue to grow and further overburden the County operated emergency shelter, Orangewood Children's Home (OCH), and the existing community placement resources.

***Best Known Practice
Values:***

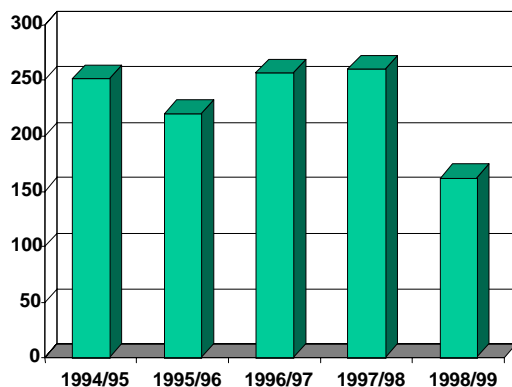
The Agency has embraced the values found in the Best Known Practices that are guided by the principles of strength-based, family-centered, community-based and culturally competent services and methods.

The following were identified in 1998 Plan contributing factors to the projected increases:

- Growth of the general child population
- Increasing urbanization and associated ills
- Increased severity of abuse
- Longer lengths of stay at Orangewood due to lack of placement resources
- Increased number of children returning to OCH from out-of-home care

The Placement Resource and Support Services Strategic Plan was prepared prior to July 1998. Since the report was submitted Orangewood's daily census dramatically declined 38 percent as compared to the prior year. The downward turn first evident in 1998/99 has continued the last six months. This change has occurred in response to several factors:

**Orangewood Children's Home
Average Daily Population**



1. Efforts to locate and assess relatives of incoming children were accelerated, with some occurring within the first few hours of case intervention.
2. New regulations limiting the stay of children under six to a maximum of 30 days led to procedural changes; rather than limiting those changes to this age range, the agency implemented placement steps upon admission for all children.
3. Placement staff was expanded to improve timely response to new cases.
4. Agency management convened weekly reviews of cases awaiting placement to insure clear direction in placement plans.
5. The commitment of the Board of Supervisors to provide more resources for the support of out-of-home caretakers has made a significant difference in the length of stay of children at Orangewood, thus reducing the daily census.

Many of the proposed strategies in the 1998 Placement Resource and Support Services Strategic Plan were implemented:

- Purchased the Intermediate Care Facility in Orange.
- Increased support for foster parents in the areas of day care reimbursement, in-home support services, parking permits, funding for foster parent activities, supervised parental visits, child mental health services and training opportunities.
- Developed group homes for severely emotionally disturbed children and sibling sets.
- Expanded family preservation and support services.
- Enhanced collaboration with the Health Care Agency, Probation, Education and Regional Center.

The immediate assessment of relatives, intensified diversion efforts, increased placement stability and enhanced resource support and development resulted in a significant reduction in the children's average lengths of stay, and thus in Orangewood's occupancy.

Other proposals included in the 1998 plan are pending further assessment and/or approval. These include:

- Develop the designated Tustin military site to serve children under the age of six.
- Develop the designated site at the El Toro military site to serve 220 youth for emancipated/failed placements.
- Implement wrap around services to maintain placements.

The 1998 Plan recommended the purchase of an existing group home facility to serve 50 children who had disrupted their prior out-of-home placement. This proposal is being deleted due to the recent decline in the Orangewood Children's Home population and the addition of new resources to help prevent and stabilize placement crisis situations.

Brief Overview of Child Welfare Services

The Children and Family Services Division (C&FS) of the Social Services Agency provides prevention, emergency, in-home care, out-of-home care, and adoption services for abused and neglected children and their families. The County of Orange delivers these child welfare services with oversight by the California Department of Social Services. Funding for the costs of these programs are shared between the county, state and federal governments. Child welfare agencies like SSA have historically provided services through four separate components:

- Emergency Response includes all activities necessary to assess, investigate, document, and substantiate a report of abuse or neglect. It also includes crisis intervention and referral services.
- Family Maintenance includes all of the services provided to a family who have either a Non Court (voluntary) or Court (ordered) service plan and whose children are in the home during the provision of the services.
- Family Reunification includes the services provided to a child and his/her family when the child is in out-of-home care and the service plan goal is to return the child to the family.
- Permanent Placement includes all the services provided to a child and his/her family, if appropriate, when the case plan goal is adoption, legal guardianship, or long term out-of-home care.

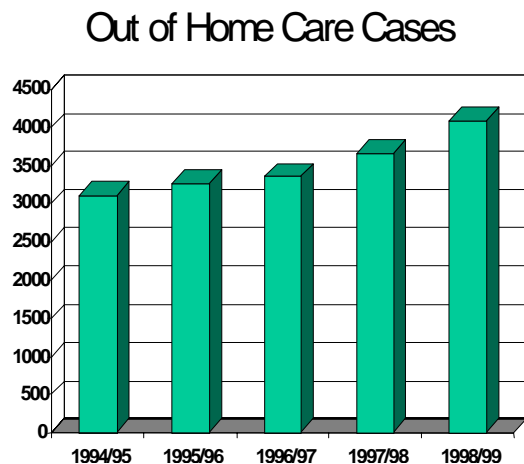
2. CURRENT AND EMERGING CHALLENGES

If the trend of escalating out-of-home care growth is not reversed, the Agency's child welfare services risks being overwhelmed by an inability to develop the supportive services necessary to reunify families, assist relatives or develop a sufficient supply of foster family and group home placements.

The Social Services Agency currently provides an expanding array of child welfare services that are vast, complex and increasingly flexible. This section presents key measurements of service activity, practice shifts and legislative changes that impact the delivery of services in Orange County. The data from 1998/99 regarding the number of children and families assisted by the Agency at various points in Orange County's child welfare system is reported on the Child Welfare System Overview Chart (see Appendix A) which also includes comparative information from 1990/91.

Growing Number of Children in Out-of-Home Care

Recent media, reform activity and the implementation of new strategies has focused considerable national, statewide and local attention on child welfare services. It has fueled a growing concern and frustration focused on the number of children growing up in out-of-home care, often for long periods of time or experiencing multiple episodes. Too often these children are not able to reunite with their family or attach to a new permanent one.



During 1998/99, 4,086 children could not live safely with their own families. SSA placed these children in out-of-home care with relatives; county licensed and Foster Family Agency (FFA) certified foster homes or group homes. This number represents a 12 percent one-year increase. The growth trend of children being raised in out-of-home care over the last five years increased 32 percent from a monthly average of 3,099 cases in 1994/95 to 4,086 in 1998/99.

These out-of-home placements include children whose case plans are to reunify with their parents, need a permanent placement, or reside with a guardian. The consistent pattern of increases since 1990 produces clear trends that support the out-of-home projections detailed in Appendix B and briefly summarized below:

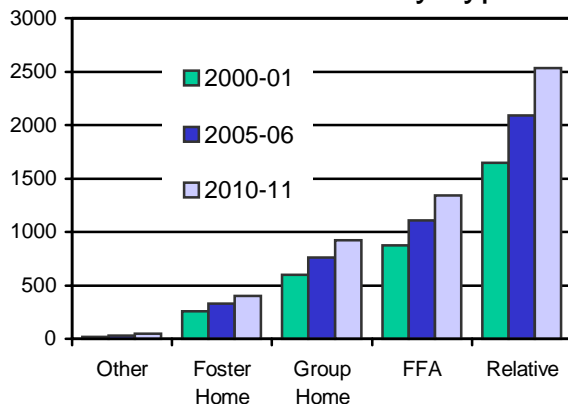
Year	Reunification	Permanency	Guardianship	TOTAL
(actual)98/99	1,656	2,227	203	4,086
00/01	1,787	2,444	234	4,465
05/06	2,246	3,135	294	5,674
10/11	2,705	3,825	354	6,884

An investment today in strategies to prevent and/or reduce the length of stay in out-of-home care can significantly reduce future county costs and infrastructure needs.

The projected total average monthly out-of-home placements for the year 2000/01 compared to 2010/11 shows a 54 percent growth in just ten years. These estimates are based on the trend of prior years continuing without mitigating strategies being implemented or other events. SSA's budgeted cost share for children in out-of-home care for the FY 1999 -2000 was 21.7 million dollars.

Analysis: The projected growth of children in out-of-home care for the next ten years assumes that no corrective action is taken. The County's expenditures for out-of-home care would substantially increase and potentially drain revenue and resources from considerably less expensive family maintenance and preservation services. The growing population of out-of-home cases would also create a larger number of children who may have a crisis that results in a placement disruption and a return to Orangewood or other shelter care facility.

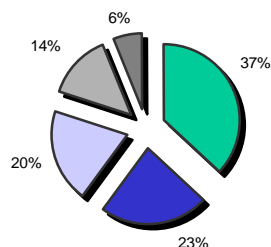
Projected Children Out-of-Home Care by Type



Comparison with Other Counties

Orange County has historically had one of the lowest levels of children in out-of-home care of any county in the State of California. In the last available report from March 1999, Orange County had a rate per 1,000 general population of 1.64 children, lowest among counties with 1,250,000 population or greater. Other counties varied from a high of 5.04 in Los Angeles to a low in Santa Clara of 1.83. The statewide average was 3.30.

Out-of-Home Placements Percentages



Orangewood is no longer the single portal of entry into custody and emergency shelter. Instead, the evolving child welfare system has multiple entry points and tailors services to meet the unique needs of each child and family at various points of care.

Analysis: Although Orange County's out-of-home rate remains low compared to other similar counties, it would be prudent to plan for development and flexible use of additional shelter care and out-of-home resources. Orange County's increasing urbanization and changing demographics may lead to higher demand similar to other older counties.

More Severely Abused and Emotionally Troubled Children

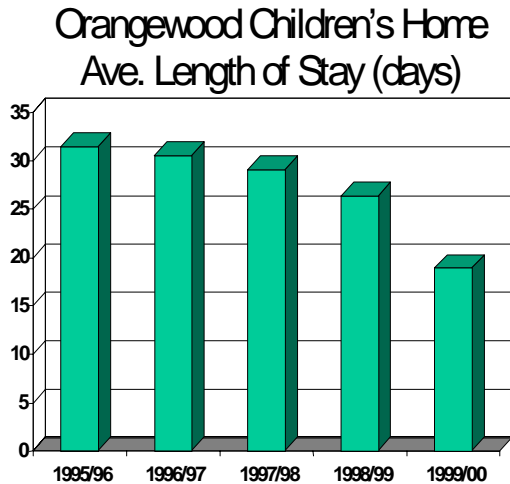
The 1998 Placement Resource and Strategic Services Plan reported that the number of severely emotionally disturbed and acting out children in the Orangewood population continued to increase dramatically. These children, who tended to remain longer than 60 days, made up 25 to 30 percent of the OCH population and consumed enormous amounts of staff time and energy. Many of these more difficult children are now being maintained with additional mental health services in family and community based programs.

Analysis: Specialized programs such as higher level group homes and intensive therapeutic foster homes are needed to

effectively provide stabilization, specialized treatment, transitional support and crisis respite services for the more hard to place and maintain children. Private providers that can deliver a full range of integrated services, individually or collectively, can decrease service fragmentation, increase continuity of care and demonstrate more positive outcomes.

Orangewood Population Significantly Reduced

Historically, the daily census of OCH has been closely watched as an indicator of the demand for shelter care and community placement resources. However, changing practices, additional resources and new regulations have had a significant impact on the use of the shelter. Several of the key measures associated with the Orangewood population can be found in a spreadsheet located in Appendix C. The impacting factors and analysis of the data are examined in the following sections.



Daily Population, Number of Admissions and Length of Stay

Chronic overcrowding of the facility has focused attention on OCH's occupancy since the facility was built and the first phase occupied in 1985. However, a decline in the utilization of Orangewood started in July 1998, when an average daily population of 279 children was recorded. The June 1999 census report indicated an average daily population of 125 children. Less than 100 children were using the facility during the months of Sept., Oct., and Dec. 1999.

The reduced average number of days that children remain at Orangewood is the primary driver of the lower daily occupancy level. Additional resources, procedural changes and new regulations significantly impacted the average daily population

The average number of children entering OCH each month during 1998/99 was 241, for an annual total of 2,891. This represents a 13 percent reduction as compared to the previous year. Significant decreases occurred specifically in the number of children admitted from the home of their parents (-304 or a -17.2% decline), from disrupted placements in group homes (-60, or -6.3%) and from the care of relatives (-56, or a -16.0% decline).

During 1998/99 the rolling average length of stay measured for children released from OCH was 26.4 days as compared to 29.1 days for the previous year. The steady decline during 1998/99 ended with a low of 21.8 days in June 1999 and continued to drop to just 15.4 days in December 1999.

Analysis: The reduced OCH population is related to several new procedures, regulations and services implemented during the year to maintain children in the least restrictive, safe environments. Additional community support, such as

family resource centers, need to be added so that the available services are not quickly saturated and cause the census to rebound. A lower baseline enables more flexible and targeted use of the existing and planned shelter care and placement resources.

Progress has been made not only in reducing the demand for first time admissions to Orangewood but also the number of children recycling through the shelter because of a troubled or failed placement.

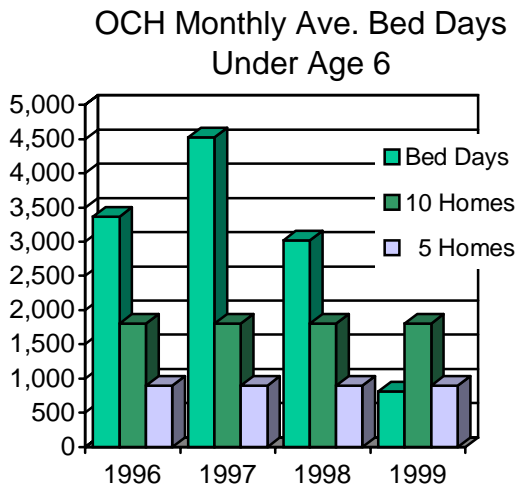
Status of Children at Admission

During 1998/99, the number of new cases of children not already Dependents of the Juvenile Court declined 12.2 percent and has continued to further decrease 15 percent during the last six months of 1999. The number of children admitted to OCH as a result of a disrupted placement in out-of-home care decreased 6.3 percent. OCH studies have found that these children, designated "Court Returns," are typically more difficult to replace in other group care facilities and have longer lengths of stay. Respite admissions for three to four day visits by children needing a break from their placement also declined 37.1 percent.

Analysis: A continuing decline in the number of children admitted and returned to Orangewood would reduce the need for some of the capacity planned for the El Toro facility.

Children Under Six

AB 1197 (1993 California Statue, Chapter 478) imposed regulations effective in 1999 that limited the stay of children under six in congregate care settings, such as Orangewood, to a maximum of 30 days. The Agency implemented procedural changes to divert from Orangewood or expedite the appropriate exits of not only this segment of the OCH population but also all ages of children. These changes are reflected in the reduced number of bed days and the admissions of children under age six. The estimation of the future number of admissions for children under the age of six were derived by taking 27 percent of the total number of projected admissions for all ages of children each year 1999/00 to 2010/11. During June through November 1999 the children under six years old were 27 percent of all the actual OCH admissions. The estimated admissions are presented in more detail in the Appendix and summarized below:

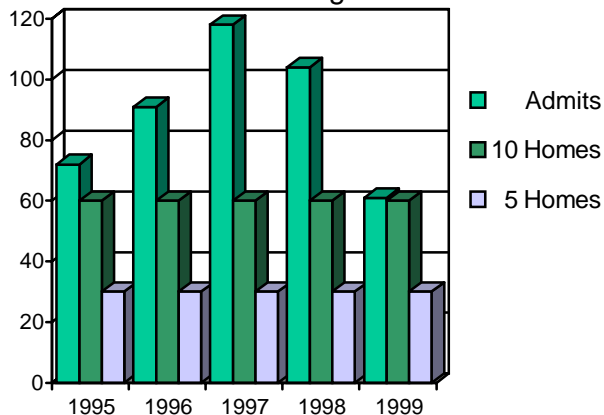


Year	Annual Admits	Monthly Admits
99/00	800	67
00/01	820	68
05/06	888	74
10/11	899	75

The 1998 Placement Resources and Support Services Plan recommended the use of the Tustin Air Station site for creating

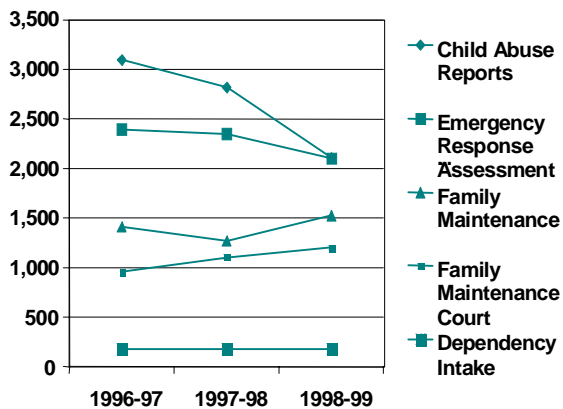
multiple family-like homes for children under the age of six and their siblings in group settings no larger than six per dwelling. The Orangewood staff report that most children, under the age of six, are often admitted with older siblings. The architectural assessment indicated the site plan would accommodate up to 60 children and provide up to 1,825 monthly bed days.

OCH Monthly Admissions
Under Age 6



Analysis: *The number of OCH admissions, albeit with shorter lengths of stay, continues to be significant. The current and projected admissions and bed days of children under the age of six does not indicate an immediate need for the maximum 60 bed capacity but strongly justifies an initial phase of 30 to 40 beds. The addition of the siblings up to the age of twelve creates a demand closer to the maximum planned capacity. Given the recent and substantial policy, procedure and resource changes, the best use of the Tustin site would have facilities that can be right-sized for actual levels of future demand (from optimally 30 to a maximum of 60 beds). The facilities can be designed for flexible alternative program uses as needed.*

Key Service Indicators



Child Abuse Reports Down / Serious Abuse Remains Constant

During 1998/99, 25,312 children were reported abused and neglected in Orange County, representing a 25 percent one-year and 40 percent five-year decline. The number of emergency response investigations that needed a face to face assessment following the abuse report declined 11 percent in 1998/99 and fell 17 percent from the peak five years ago. However, the number of serious referrals remained relatively constant with the Agency's social workers filing just 2 percent fewer Juvenile Court service petitions in 1998/99, than in the previous year. In fact, the number of

families with children who did not need to be removed from the home and that the Agency determined needed additional family maintenance services, either voluntary or under court supervision, increased 20 percent during 1998/99. A comprehensive presentation of the projected demand for Orange County's child welfare services can be reviewed in Appendix B. Monthly average projections of selected key service growth indicators for the years 2000/01 to 2010/11 are listed below:

	(actual) 98/99	00/01	05/06	10/11
Child Abuse Registry	2,109	2,220	2,406	2,435
Emergency Responses	2,096	2,335	2,357	2,379

Although the number of child abuse reports have significantly declined, the number of emergency responses and Court petitions filed suggests that there is a stable level of demand for interventions and resources for the moderate and more severe incidents.

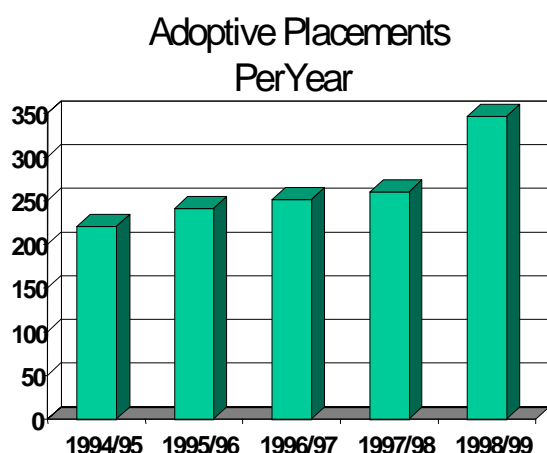
Family Maintenance Non-Court	1,521	1,580	1,744	1,907
Family Maintenance Court	1,204	1,189	1,507	1,772
Dependency Intake Petitions	179	199	201	203

Analysis: The moderate decline in emergency response investigations and the minimal decrease in court petitions filed indicate that the front end demand for the Agency's services has remained comparatively constant despite the major drop in child abuse reports. Last year's increase in the family maintenance caseloads, both Court supervised and Non Court, indicates more families need assistance but children are being diverted from out-of-home care. More community-based services will need to be developed to support the families in their local communities.

Federal & State Legislation Impact Local Child Welfare Services

Federal Adoption and Safe Families Act

Responding to the increasing concerns raised about the performance of the child welfare system across the nation, the Congress enacted the Adoption and Safe Families Act (ASFA). This landmark, bipartisan legislation was signed into law in November 1997. ASFA contains five key principles that need to be part of the Social Services Agency's strategic initiatives:



- Safety of children is the paramount concern that must guide all child welfare services.
- Foster care is a temporary setting and not a place for children to grow up.
- Permanency planning efforts for children should begin as soon as a child enters foster care and should be expedited by the provision of services to families.
- The child welfare system must focus on results and accountability.
- Innovative approaches are needed to achieve the goals of safety, permanency and wellbeing for children in the system.

The legislation placed a major focus on increasing the frequency of foster children being given the opportunity to be part of safe, stable and nurturing families, not just until they are eighteen years old but for their lifetime. The Social Services Agency has recently intensified its effort to find permanent families which has resulted in 374 adopted children in 1998/99, a 44 percent increase over the prior year. Recent procedural changes that will be examined in the next section should aid the Agency's development of significantly more adoptive families.

Rather than expand entitlements or fund caseload growth, the federal and state governments are eager to make the funding shift to innovative, flexible and collaborative strategies that target specific populations and can demonstrate positive outcomes. This is a welcomed emphasis on prevention efforts.

In Senate Bill 933, the state legislature set forth “family-centered, strength-based” solution oriented principles to advance an overall policy objective of establishing safe, stable and permanent families that promote healthy social, emotional, physical and cognitive development of children.

Foster Care Independence Act

Congress approved the Foster Care Independence Act just before adjourning at the end of 1999. It doubled the amount of federal funds for the Independent Living Program that provides support for young people transitioning from out-of-home care to living on their own. This legislation potentially impacts local child welfare services in the following ways:

- Funds education, vocational and job training necessary to obtain employment and/or prepare for secondary education, training in daily living skills, substance abuse prevention, pregnancy prevention and preventative health activities and connections to dedicated adults.
- Requires a portion of the funds be used for older youth, ages 18 to 21. A portion may be used for room and board.
- Allows medical benefits for former dependent children to be extended until age 21.
- Requires training for adoptive and foster parents, group home workers, and case managers to help them address the issues confronting adolescents preparing for independent living.

Statewide Foster Care Reform

Senate Bill 933 (Foster Care Reform), enacted in 1998 is a complex and far reaching piece of legislation with the intent to correct a number of problems and strengthen out-of-home care for children in California. The legislation addressed placement and assessment issues, group home quality, training and accountability, group home oversight, educational requirements, out-of-state placements, systems change, innovation and rulemaking. It specifically required the California Department of Social Services to develop model relative assessment guidelines, best practice guidelines for assessing families and children in child welfare services and protocols for the placement of children in group homes for emergency and non-emergency situations. Senate Bill 933 also required the California Department of Social Services and stakeholders to reexamine the role of group care in the context of a family-based system of care. The Re-examination Task Force is expected to make recommendations that will fortify family-based care and insure that group care is a temporary option rather than one that is used because other service options are not available in the family home or community.

3. NEW PROGRAMS AND SERVICES

The Agency's Children and Family Service division is in the midst of several major restructuring changes, the implementations of a number of complex programs, and the exploration and integration of the Best Known Practices for helping children and families. Many of the elements of this transformation overlap and become part of the Agency's more flexible, targeted and wider array of services.

The Agency's evaluation and planning of the Best Known Practices is an on going process with community stakeholder participation.

A Full Array of Integrated Services

Restructuring the delivery of local child welfare services and working together with other public agency partners and community based organizations, the Social Services Agency is building the capacity to provide Orange County's children and families with a full array of services. The major challenge is to have in place flexible, accessible and integrated services, from minimal support to comprehensive interventions. In order to do so, the Agency is rethinking and restructuring its service delivery system, implementing Best Known Practices, partnering with other public agencies and community based organizations, and contracting out for new and innovative services. These changes and new programs will have a major impact on the future demand, availability and use of the supportive services provided to birth, relative, foster and adoptive families, the emergency shelter care programs and the out-of-home placement resources.

Best Known Practices Identified

The Best Known Practices (BKP) is a special project of the Agency's Children and Family Services division. In March 1999, a five member BKP Team was created to research, synthesize and recommend the Best Known Practices in order to provide an integrated and comprehensive approach to child welfare services. The Best Known Practices have a strong commitment to family centered, strength-based, community-based and culturally competent values and principles. The implementation of the Best Known Practices values and principles will impact all aspects of child welfare services and require significant shifts in how services are designed and delivered.

BEST KNOWN PRACTICES SHIFT

FROM : PROFESSIONALLY CENTERED	TO: FAMILY CENTERED
Experts determine need	Families identify need
Families viewed as operating from deficit	Families viewed as capable
Fit family to professional services	Services tailored to unique family needs
Low level of family decision making	High level of family decision making
Focus on identifying/removing problems	Focus on enhancing strengths
Fixed roles and service provision	Flexible roles and service provision

The Answer's Benefiting Children (ABC) Child Abuse Prevention Plan including the development of a county wide network of family resource centers provides a frontline strategic effort to reduce the number of children in out-of-home care.

According to the California Department of Social Services, the purpose of this shift in practice is to improve the quality of care and well being of children in the following ways:

- 1) Help families to strengthen themselves and promote safe, stable environments for their children.
- 2) Build resources to keep families together whenever possible.
- 3) Promote each family's ability to work as a decision making body.
- 4) Explore and develop placements with relatives.
- 5) Increase safety, stability and permanency for children and families.

The Social Services Agency held community forums on June 30, 1999 and November 2, 1999 to lay the foundation for the various initiatives the Agency might undertake. Future focus groups and work groups will gather for more in -depth discussion on specific topics, obtain feedback and discuss implementation strategies.

Support for Safe, Stable and Permanent Families

Desirable Characteristics of a Family Resource Center:

- *Easily & naturally accessible physical location*
- *Family focused & culturally sensitive*
- *Full array of services*
- *Center based & outreach oriented*
- *Coordinated not duplicative services*
- *Strong resident & parent involvement*
- *Extensive volunteerism*
- *Community partnerships & collaborative process*
- *Blended funding*

The Agency's Family and Communities Together (FaCT) program has already established a network of seven community based collaborative partnerships aimed at strengthening needy and at -risk families, fostering self-sufficiency, and supporting the healthy development of children in order to prevent child abuse. The Agency's expanding family preservation and support activities, increased Orangewood diversion efforts, and a projected demand for relative, foster and adoptive families, requires that additional accessible community based services, such as those offered at family resource centers, be developed throughout Orange County.

In May of 1999, the County was awarded funds from the Office of Child Abuse Prevention (OCAP) and the Office of Criminal Justice Planning (OCJP) to implement the state's new Answers Benefiting Children (ABC) program initiative. The FaCT program was selected to lead the planning effort. Approved by the Board of Supervisors in March 2000, Orange County's ABC Plan included two primary goals: 1) the implementation of a research and practice supported, replicable child abuse prevention model in a targeted at -risk community and 2) the development of a comprehensive child abuse prevention plan using existing county services and funding resources reorganized to sustain a countywide network of family support and prevention services.

This Child Welfare Services Strategic Plan Update, the recently approved ABC Plan and the Family Resource Center Report provide the combined elements of SSA's comprehensive child welfare services plan.

Concurrent Planning enables social workers to consider reunification and termination of parental rights simultaneously. It facilitates faster case resolutions by setting tighter timeframes for the birth families and workers to specify goals and responsibilities at the onset of the child's out-of-home care. It can help children avoid finding themselves on a one way linear path that does not lead back home or to an adoption.

The Wraparound Process represents a fundamental change in the way services are designed and delivered. It is an unconditional commitment to create services on a "one kid at a time" basis to support normalized and inclusive options for children and youth with complex needs and to support their family.

New Practices and Procedures Implemented

Structured Decision Making

The Agency implemented the first phase of this state sponsored, research based safety and risk assessment and intervention model designed to assess child abuse cases. The goal of Structured Decision Making is to ensure that all social workers use the same assessment criteria when acting to protect children from abuse and predict correctly the level of risk in each case.

<u>Concepts</u>	<u>Tools</u>
<ul style="list-style-type: none"> • Introduces Structure to all decision points • Increases consistency and validity of decision making • Targets resources to families most at risk • Improves effectiveness of Child Protection System 	<ul style="list-style-type: none"> • Response Priority • Safety Assessment • Family Strength and Needs Assessment • Standardized Reassessment • Reunification Assessment

Concurrent Planning

Recent federal and state law mandates the practice of concurrent planning. It mandates that all children with a case plan to reunify with their parent(s) also have an alternative permanent plan. For families identified as having a poor prognosis for reunification, permanency and reunification services may be delivered simultaneously. SSA recently implemented a concurrent planning pilot project. Two concurrent planning social workers are assigned to a Dependency Investigation Unit. A Family Reunification Prognosis Tool is being tested to evaluate the effectiveness of the instrument in predicting a family's likelihood of reunification. Full implementation of concurrent planning is expected in June 2000.

Wraparound Services

The wraparound process can maintain children in their birth family homes, avoiding or reducing stays in out-of-home care placements. SSA is developing, with other public agencies and community partners, a comprehensive plan to submit to the California Department of Social Services that will implement a Wraparound Services Pilot Project in Orange County. California legislation established a five-year statewide pilot project that allows counties the flexible use of state foster care funds to provide eligible children with family-based services as an alternative to group home care. The target population for the pilot

program is children who are currently, or who would be, placed in a group home with a Rate Classification Level (RCL) of 12 or higher. Assessment, services planning, and activities are facilitated through the use of Child and Family Teams that consist of the family, agencies serving the child and family, and other persons identified by the family as a resource. SSA must request a specific number of service allocation slots, arrange for approved training for staff and providers in the Wraparound process, and specify a plan for the evaluation of costs and outcomes.

Restructuring & Partnerships Enhance Coordination

The Placement Coordination Program

The goal of the Placement Coordination Program will be to stabilize children as quickly as possible in the least restrictive, most appropriate setting, thus reducing unnecessary placement changes and improving the continuity of care.

Comprised of existing placement staff and new support staff, the Placement Coordination Program will effectively move the Agency's operations away from a Monday -Friday structure, increasing responsiveness to newly detained children in OCH and to those in an out-of-home placement crisis. It will serve as a 7 - day per week command post for all intake, diversion, placement and out-of home crisis service. Placement Coordination Program staff will have extensive knowledge of all agency, contract and community resources, and authority to access those resources as necessary in crisis situations. The program's social workers' responsibilities include the following:

- Coordinating emergency relative home assessments.
- Arranging immediate in-home support services.
- Diverting children from youth shelters when appropriate.
- Placing children in foster homes and group homes.
- Ensuring essential medical, mental health and education services are arranged to facilitate a successful placement.
- Responding to crises in all out -of home settings when the assigned social worker is not on duty.

Continuing Care Placement Unit

This "unit" is actually a special project serving seriously emotionally disturbed children who are under the supervision of the agency. The county mental health staff share cases with SSA social workers; the combined multi-disciplinary expertise has led to a greater understanding of the child's needs, prevention and better management of problem behaviors, increased stability in placement, and improved continuity of care. The mental health staff includes a psychiatrist and psychologists, adding valuable expertise and oversight of psychopharmacological care. The Board of Supervisors recently recognized the partnership efforts of the Social Services Agency and the Health Care Agency.

Orange County Children's System of Care

In October 1996, the Board of Supervisors established a Steering Committee which Supervisor Coad now Chairs with the Behavioral Health Director as Vice -Chair, to lead a planning process to develop a Children's System of Care (CSOC) for children who are or at risk of becoming severely emotionally disturbed (SED). The Health Care Agency, Social Services Agency, Probation and Orange County Department of Education provide staff support. The goal is to reduce the out -of-home placements by improving service delivery to SED children using inter-agency collaboration, coordination, communication and blended resources.

Development of Community Resources

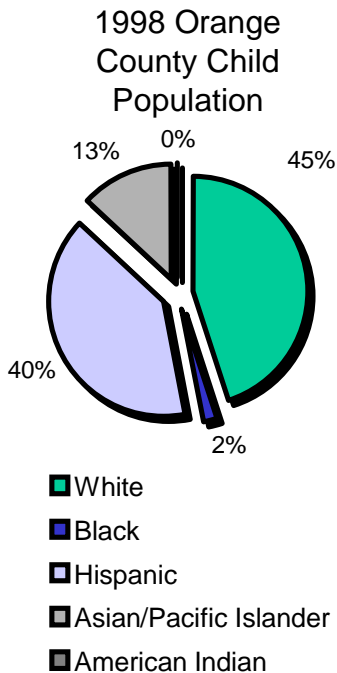
Increased Contract Resources and Services

With the support of the Board of Supervisors, the Social Services Agency has increasingly contracted with more private, community-based organizations to provide varied services that target specific populations, expand the spectrum of available services and enable the development of more flexible and innovative programs. The broad range of contracted services include the following:

- In-Home Emergency Intervention Services (New Contract) – 72 hour crisis intervention services with one hour response time to stabilize situations to avoid child's removal to OCH.
- Family Preservation Services (Expanded Program) – 90 day in-home teaching, support and supervision. Reduces need for out-of-home care, shortens stays and transition home.
- Foster Parent Support Services (New Contract) – Trained and supervised staff provide practical support services including transportation, babysitting, tutoring, and special attention.
- Family Resource and Visiting Centers (New) – Community site for family preservation and support, foster child/parent visits, and foster parent recruitment, training and support.
- Bridge Builders (New Contract) – Classes, training, and counseling for parents preparing to adopt a special need child.
- Transition Services (Blended funds with HCA) – Clinical and practical in-home support services up to 90 days for children transitioning from group home settings to family home.

Additional Foster Family Support

SSA now offers reimbursement of the cost of day care for children under age six when the foster parent or relative caretaker is employed. The goal is to increase the number of children placed with relatives and to recruit more licensed foster parents for this age range. SSA also expanded respite care for regular licensed County foster parents to better recruit, support and retain families.



The County has invested in new contracted services focused on prevention, risk assessment, family maintenance, out-of-home care diversion & transitional services. Many of the services are provided directly in the family, substitute family, or group home setting in order to maximize accessibility, increase responsiveness and individualize needed support services.

4. FIVE KEY STRATEGIES

These Five Key Strategies are the basis for planning & implementing services for abused children in Orange County

Implementation of a comprehensive Child Welfare Services Strategic plan will require strong County leadership, a public and private concerted effort, a prudent long-term investment in all our children and families, and the development of a full spectrum of flexible, integrated resources and services.

One: Orange County should expand child abuse prevention and family support services developed by a public and private partnership and delivered via a network of Family Resource Centers.

The Board of Supervisors adopted in March 2000 the Child Abuse Prevention Plan contained in the Answers Benefiting Children (ABC) Plan. The Family Resource Centers Report will be submitted next month for the Board's review and approval. The development of a countywide network of Family Resource Centers is an essential element of the Social Services Agency's countywide, frontline child abuse prevention plan. It can also help divert and reduce the number of children in out-of-home care.

Two: Orange County should integrate "Best Known Practices" into all aspects of the services for abused children and their families.

Best Known Practices are built on a foundation that is family centered, strength based, community-based and culturally competent. The implementation of the Best Known Practices will lead to a more flexible child welfare system. It requires a full array of flexible services that creates a new more individualized and outcome focused relationship with the families served. Many of the new programs and services described in this document are designed to support this needed flexibility.

Three: Orange County should expand support services for relative, foster and adoptive families. Assistance should be increased for the transition of youth from foster care to independent living.

- ✓ Assess the unique needs of relatives and tailor services for them. Reduce barriers/disincentives for relatives to adopt.
- ✓ Encourage adoption and develop special foster/adoptive parents willing to care for a child during concurrent planning.
- ✓ Further expand opportunities for training, mileage and childcare reimbursement, respite and transportation services.
- ✓ Establish training and support, birth parent visitation and child counseling programs in community based resource centers.
- ✓ Develop transitional housing and support for young people leaving out-of-home care and beginning independent living.
- ✓ Insure priority access and treatment for foster children needing physical, mental health, drug and developmental services.

The number of children not able to safely live in their own homes has continued to grow unabated and is projected to grow 54 percent in ten years. Investments today in strategies to prevent and/or reduce out-of-home care can lower future County costs and infrastructure needs.

The current and projected numbers for the admissions and bed days of the children under the ages of six at Orangewood do not indicate an immediate need for the previously proposed "maximum 60 bed capacity at Tustin. However, it strongly justifies an initial phase for an "optimal" capacity of 30 beds with the flexible temporary use of the additional space.

Four: Orange County should develop or enhance specialized treatment programs for emotionally and behaviorally troubled children in order to divert, stabilize and/or transition their placement in out-of-home care.

- ✓ Increase Intensive Treatment Foster Care Programs and develop Wraparound Services for troubled children in family homes or transitioning from group homes.
- ✓ Assess with group home providers their strategic role and target population and help intensify services when appropriate, such as operating at a higher level of care, providing mental health day treatment or offering outpatient services.
- ✓ Develop an emphasis on family empowerment and the connections to children, including relatives, foster families and adoptive parents.

FIVE: Orange County should plan for flexible, "right-sized" facilities to accommodate uncertain future needs.

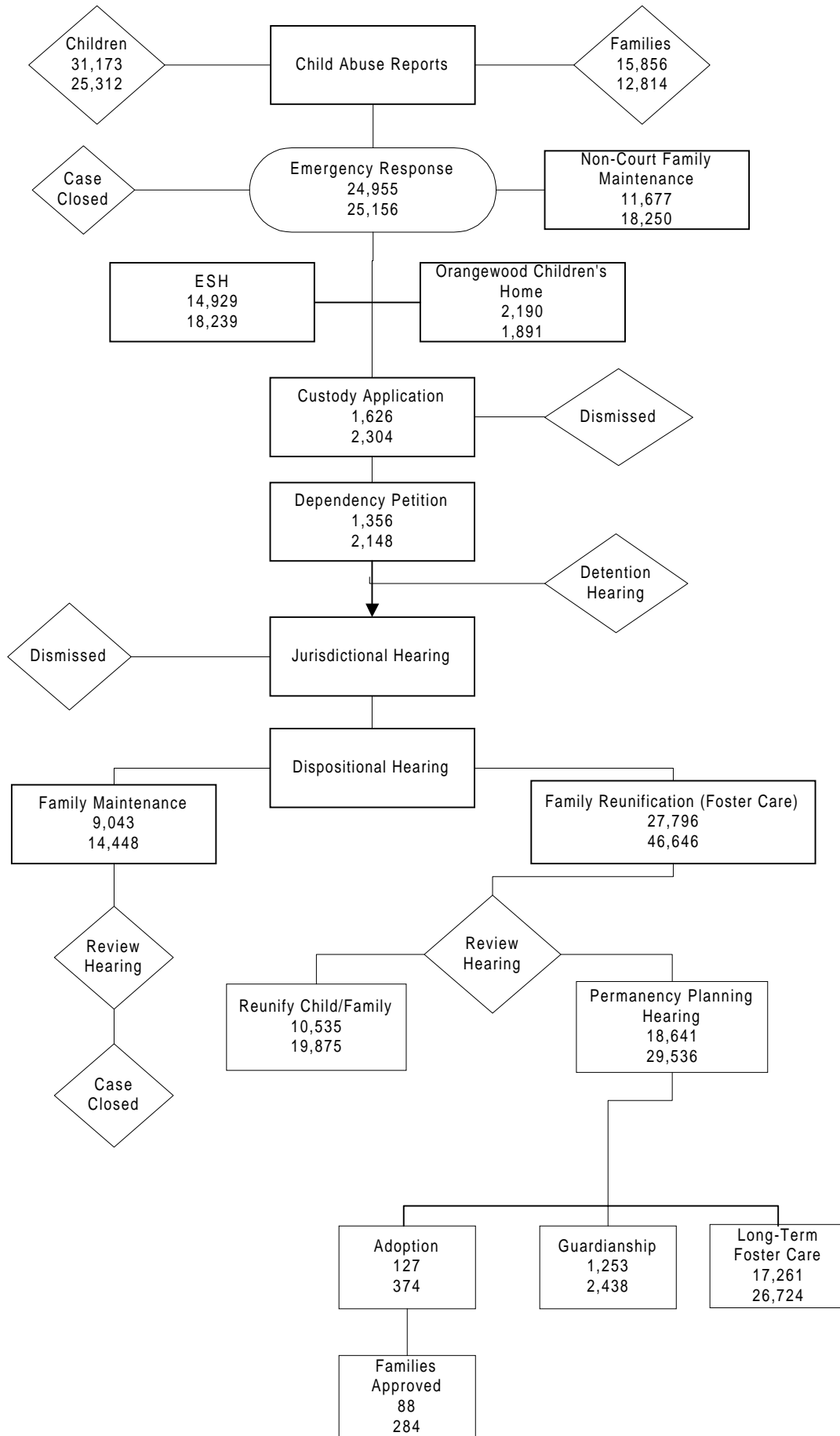
USMCAS, Tustin The 1998 Strategic Plan proposed the construction of a four acre campus that included ten family homes and a multipurpose building for children under the age of six and sibling groups. It recommended a "house parent" staffing model that employs a married couple living in each home. A six-child limit per home creates a maximum capacity of sixty children on the campus. SSA would own the facility but lease it to a private agency to operate the programs. Current admissions data demonstrates the need for a site to optimally shelter 30 to 40 children. A more flexible configuration is now recommended for the Tustin Family Campus that meets the initial need for thirty beds (five homes), but if future demand increases, the site could serve the maximum of sixty children (ten homes). In the interim, the Tustin site could offer additional programs, such as family visitation, assessment and/or specialized child care training. Other uses will be considered. The conveyance of the property may cause timeline delays. The architect has been selected and site planning can begin in March 2000 and is expected to take approximately a year. Construction may begin in the Spring of 2001 and the site could be operational the end of 2002.

USMCAS, El Toro Changes are recommended to the timing, size and type of facilities identified in the 1998 Plan. The development of services should be delayed from 2005 to 2008. The initial construction phase could include a fifty bed emergency intake facility and a variable use facility for severely emotionally disturbed children, an independent living program facility or other service program. The speed and frequency of demographic, social, legislative, and other changes will require periodic reassessment of these proposed uses of the El Toro site. After 2010, the thirty-acre site can be further developed in response to needs identified in the future.

APPENDIX A

Child Welfare Services Overview Chart

Child Welfare System Case Loads **1990/91 (1st) vs. 1998/99 (2nd)**



APPENDIX B

Child Welfare Services Projections

Updated Projections of Future Need

The child welfare system is undergoing some rather dramatic changes. Without articulating the specifics of these changes, their impact is obvious in most of the empirical evidence concerning the systems operation. From the very highest level of system activity, that of Child Abuse Registry (CAR) Reports, to more smaller component parts such as Adoption Placements, there is fairly clear evidence that the system is in flux. Until the system stabilizes, projections of future demands will be at best good guesses.

Child Abuse Registry Reports Orange County Projections

Table 1

Year A	Column B	Column C	Differences D	Pop E	Column F	Column G	Column H	Column I	Column J
84/85	7760	7760		567988	13.7	13.7			
85/86	15352	15352		575497	26.7	26.7			
86/87	15144	15144		583553	26.0	26.0			
87/88	16033	16033		587584	27.3	27.3			
88/89	19476	19476		588730	33.1	33.1			
89/90	27448	27448		591153	46.4	46.4			
90/91	31173	31173		597386	52.2	52.2			
91/92	35132	35132		616763	57.0	57.0			
92/93	37160	37160		643207	57.8	57.8			
93/94	40104	40104		663539	60.4	60.4			
94/95	42342	42342		683095	62.0	62.0			
95/96	35312	47258	11946	703161	50.2	72.1			
96/97	37105	50784	13679	722964	51.3	77.1			
97/98	33791	54310	20519	748205	45.2	82.1			
98/99	25312	57836	32524	768293	32.9	87.1			
99/00	42776	61362	18587	787153	59.5	92.1	46847	72491	25976
00/01	44634	64888	20254	807247	61.6	97.1	49729	78382	26639
01/02	46492	68414	21922	822798	63.7	102.1	52405	84010	27152
02/03	48351	71940	23590	837963	65.8	107.1	55121	89753	27653
03/04	50209	75466	25257	852332	67.9	112.1	57847	95558	28127
04/05	52067	78992	26925	864236	70.0	117.1	60460	101219	28520
05/06	53925	82518	28593	874940	72.0	122.1	63036	106852	28873
06/07	55784	86044	30261	882853	74.1	127.1	65450	112237	29134
07/08	57642	89570	31928	889276	76.2	132.1	67784	117505	29346
08/09	59500	93096	33596	892201	78.3	137.1	69870	122357	29443
09/10	61358	96622	35264	888868	80.4	142.1	71466	126349	29333
10/11	63217	100148	36932	885353	82.5	147.2	73032	130281	29217

Child Abuse Registry reports indicated a clear and consistent pattern of increase from 1984-85 through the 1994-95 year. In 1984-85 the number of CAR reports was 7,760; by 1994-95 this number had grown to 42,342 with recorded annual increases each and every year in between. See Table 1.

The difficulty is projecting demands on the system is evident in Table 1. Column C contains projections for the years 1995/96 through 2010/11 based on the historical data 1984/85 through 1994/95. This simple trending method produces a 2010/11 estimate of over 100,000 CAR reports. Column B on the other hand projects the 1999/00 through 2010/11 years based on the 1984/85 through 1998/99 data; i.e., includes the most recent four years of decline. This projection

is a full 37,000 CAR reports smaller by the year 2010/11. Column D contains the differences between Column B and Column C. For the years 1995/96 through 1998/99 the difference is between the actual and the projected. For the years 1999/00 through 2010/11 the difference is between the two sets of projections.

Another approach to anticipating the future is the use of rates. Column E provides estimates and projections of the population of Orange County for the ages 0 through 17. The actual rates for the years 1984/85 through 1998/99 appear in the shaded area in Column F. Once again, the rates climb for 1984/85 through 1994/95 after which they begin to decline. The data for the years 1999/00 through 2010/11 in Column F are the projected rates based on the actual data through 1998/99. In Column G, the rates given for the years 1995/96 through 2010/11 are projected using only the actual data through 1994/95. Again, the dramatically different picture produced as a result of the recent changes in the system is apparent. In Column H and Column I these rates respectively are applied to the project population producing projections of anticipated CAR reports. Notice that the Column G projected rates produced an estimated 130,000 CAR reports in the year 2010/11.

Finally, assuming that the declining rates represent real and rather permanent changes to the system of child welfare, Column J applies the most recent rate of 33 CAR cases per 1000 population of children 0 to 17 to each of the years 1999/00 through 2010/11. It is probably safe to say that the county should not expect to see any more than 30,000 CAR reports per year during the next decade. This conclusion assumes that there is no dramatic reversal to any of the policies that have lead to the current levels of system activity.

ER's, Custody applications and Dependency IP's

Orange County: 1990/91 – 1998/99

Level of Activity Projected: 1999/00 – 2010/11

Table 2

Year	ER Ne	Custody Applications		Dependency IP	
		Number	Rate/1000 New ER's	Number	Rate/100 Applications
1990/91	24955	136	5.4498	113	83.1
1991/92	27510	161	5.8524	137	85.1
1992/93	27820	176	6.3264	148	84.1
1993/94	29121	178	6.1124	149	83.7
1994/95	30210	191	6.3224	159	83.2
1995/96	27590	164	5.9442	143	87.2
1996/96	28758	211	7.3371	185	87.7
1997/98	28187	211	7.4857	183	86.7
1998/99	25156	192	7.6324	179	93.2
1999/00	27966	213	7.6324	199	93.2
2000/01	28019	214	7.6324	199	93.2
2001/02	28072	214	7.6324	200	93.2
2002/03	28125	215	7.6324	200	93.2
2003/04	28178	215	7.6324	201	93.2
2004/05	28231	215	7.6324	201	93.2
2005/06	28284	216	7.6324	201	93.2
2006/07	28337	216	7.6324	202	93.2
2007/08	28390	217	7.6324	202	93.2
2008/09	28443	217	7.6324	202	93.2
2009/10	28496	217	7.6324	203	93.2
2010/11	28549	218	7.6324	203	93.2

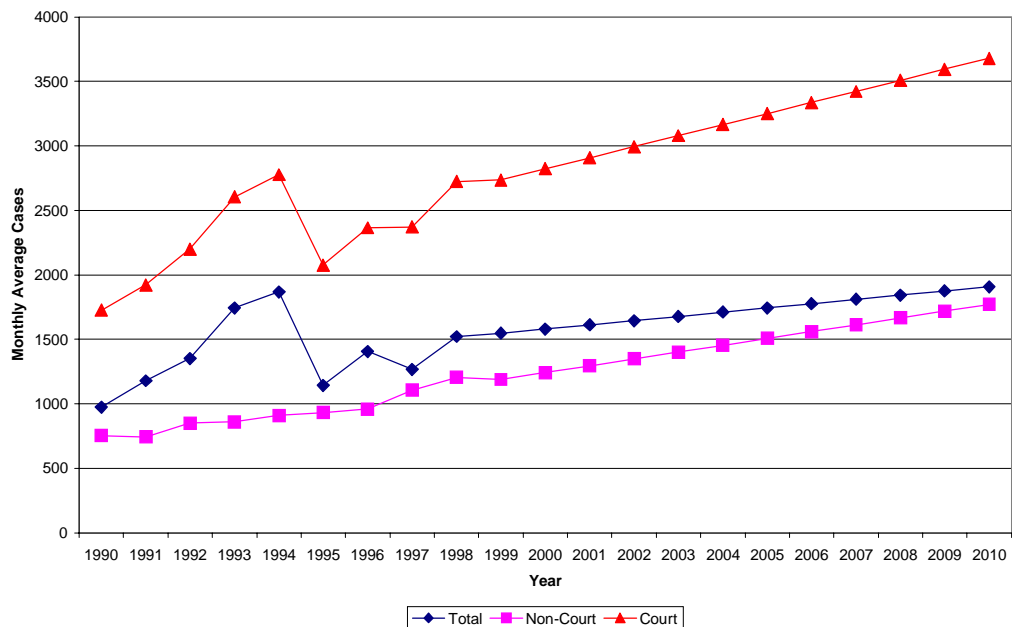
The number of New ER's for the years 1999/00 to 2010/11 were produced using a simple trend line. The growth is mild primarily as a result of the dramatic dip occurring in the 1998/99 data. The rate of custody applications per 1,000 New ER cases increased consistently from 1990/91 through 1998/99. The 1998/99 high point was chosen as a constant to apply to the years 1999/00 through 2010/11. This produces a very conservative estimate of future activity. Finally, the rate of Dependency IP's per 100 custody applications has also been increasing on a consistent basis from 1990/91 to the present. Once again, the most recent high rate of 93.2% was used to apply to the years 1999/00 through 2010/11. These estimates are conservative indicators of the likely minimal demands on the system.

**1999/00 – 2010/11 Projected Average Monthly Caseloads
Family Maintenance: Court, Non-Court and Total**

Table 3

Family Maintenance Monthly Averages			
Year	Non-Court	Court	Total
1990/00	973	754	1727
1991/92	1179	743	1922
1992/93	1351	849	2200
1993/94	1745	860	2605
1994/95	1866	911	2777
1995/96	1143	932	2075
1996/97	1406	959	2365
1997/98	1267	1105	2372
1998/99	1521	1204	2725
1999/00	1547	1189	2736
2000/01	1580	1242	2822
2001/02	1613	1295	2907
2002/03	1645	1348	2993
2003/04	1678	1401	3079
2004/05	1711	1454	3165
2005/06	1744	1507	3250
2006/07	1776	1560	3336
2007/08	1809	1613	3422
2008/09	1842	1666	3507
2009/10	1874	1719	3593
2010/11	1907	1772	3679

Family Maintenance: Trend Projections



Out of Home Placements: 1984/85 – 1998/99

Projections for 1999/00 through 2010/11

Table 4

Year	Family Reunification	Permanent Placement	Guardianship	Totals
1984/85	616	596	52	1264
1985/86	778	975	114	1867
1986/87	813	1061	127	2001
1987/88	842	1181	115	2138
1988/89	928	1309	98	2335
1989/90	927	1433	99	2459
1990/91	878	1438	104	2420
1991/92	817	1521	121	2459
1992/93	1112	1436	136	2684
1993/94	1256	1403	159	2818
1994/95	1306	1617	176	3099
1995/96	1357	1713	179	3249
1996/97	1314	1848	187	3349
1997/98	1435	2034	195	3664
1998/99	1656	2227	203	4086
1999/00	1695	2306	222	4223
2000/01	1787	2444	234	4465
2001/02	1878	2582	246	4707
2002/03	1970	2721	258	4949
2003/04	2062	2859	270	5191
2004/05	2154	2997	282	5433
2005/06	2246	3135	294	5674
2006/07	2338	3273	306	5916
2007/08	2429	3411	318	6158
2008/09	2521	3549	330	6400
2009/10	2613	3687	342	6642
2010/11	2705	3825	354	6884

Notes: Projections are in clear area.

Projections based on simple trend analysis

Data are monthly averages for each year

**Court Placements By Type
Percentage Distributions**

Table 5

Placement Types	Jan. 99	Jan. 00	Jan. 01	Standard
Court Specified Home	4.15%	3.92%	3.69%	3.81%
Foster Family Agency Certified Home	22.64%	23.85%	25.06%	24.45%
Foster Family Home	14.05%	13.62%	13.19%	13.41%
Group Home	20.22%	19.76%	19.30%	19.53%
Relative Home	37.42%	37.01%	36.60%	36.81%
Other	1.52%	1.84%	2.16%	2.00%
Grand Total	100.00%	100.00%	100.00%	100.00%
Number of Cases	4,001	4134	4267	

Notes: Jan. 1999 is 1/13/1999

Jan. 2000 is 12/6/1999

Jan. 2001 is trended from above two points

Standard is the average of Jan. 2000 and Jan. 2001

Other Category includes: Guardian Home, Medical Facility, Small Family Home and Tribe Specified Home

**Projected Placements By Type
Orange County: 1999/00 – 2010/11
(Monthly Averages)**

Table 6

Year	Court Specified	FF Certified	Foster Home	Group Homes	Relatives Home	Other Placements	Total
1999-00	161	1033	566	825	1554	84	4223
2000-01	170	1092	599	872	1644	89	4465
2001-02	179	1151	631	919	1733	94	4707
2002-03	189	1210	664	967	1822	99	4949
2003-04	198	1269	696	1014	1910	104	5191
2004-05	207	1328	729	1061	1999	109	5433
2005-06	216	1387	761	1108	2088	113	5674
2006-07	225	1446	793	1155	2177	118	5916
2007-08	235	1506	826	1203	2266	123	6158
2008-09	244	1565	858	1250	2355	128	6400
2009-10	253	1624	891	1297	2444	133	6642
2010-11	262	1683	923	1344	2533	138	6884

**Note: The above estimates of the distribution of projected placements by type uses the standard percentage distribution calculated in the table on the top of the page applied to the total projected placements.*

Projected Admissions of Children Under 6 Years Old

Orangewood Children's Home: 1999/00 to 2010/11

Table 7

Year	Average Daily Population	Population 0 to 17	Rates per 100 Population	Admits & Projected Based On Rates	Admissions Under 6 Years Of Age by Applying 27% to the Projected Total Admissions	
					Total	Monthly
90/91	156	597386	0.3668	2191		
91/92	173	616763	0.3726	2298		
92/93	212	643207	0.4028	2591		
93/94	215	663539	0.4271	2834		
94/95	251	683095	0.4376	2989		
95/96	220	703161	0.3717	2614		
96/97	257	722964	0.4491	3247		
97/98	260	748205	0.4419	3306		
98/99	162	768293	0.3763	2891		
99/00	107	787153	0.3763	2962	800	67
00/01	116	807247	0.3763	3038	820	68
01/02	119	822798	0.3763	3096	836	70
02/03	121	837963	0.3763	3153	851	71
03/04	123	852332	0.3763	3207	866	72
04/05	125	864236	0.3763	3252	878	73
05/06	126	874940	0.3763	3292	889	74
06/07	127	882853	0.3763	3322	897	75
07/08	128	889276	0.3763	3346	903	75
08/09	129	892201	0.3763	3357	906	76
09/10	128	888868	0.3763	3345	903	75
10/11	128	885353	0.3763	3331	899	75

Data from 1990/91 through 1998/99 was analyzed (see shaded area of table). The projected average daily population figures are derived by applying a standard 18 day average length of stay to the total admitted population and using total bed days to estimate average daily population. These numbers are for illustration rather than meant as real projections. The estimates of the number of admissions for children under the age of 6 years were derived by taking 27% of the total number of projected admissions for each year 1999/00 to 2010/11. The 27% is the average percent under the age of six for the actual admissions occurring June 1999 through November 1999. The total number of admissions each year is driven by the increases in the youth population and is computed by applying the constant rate of .3763, the actual rate in the most recent year of recorded activity.

APPENDIX C

Orangewood Data Sheet

Orangewood Children's Home Population Study

	1997-98		1998-99		1997-98 to 1998-99 Changes		
How Many/How Long?	Number	Percent	Number	Percent	Number	Percent	% Distribution
Avg. Daily Population	260	100.0%	162	100.0%	-98.0	-38%	***
Avg. Length of Stay	29.1	***	26.4	***	-2.7	-9%	***
Where Did They Come From?							
Parents' Home	1764	53.4%	1460	50.5%	-304.0	-17.2%	-2.9%
Relatives	350	10.6%	294	10.2%	-56.0	-16.0%	-0.4%
Foster Homes	240	7.3%	226	7.8%	-14.0	-5.8%	0.6%
Street	171	5.2%	202	7.0%	31.0	18.1%	1.8%
Group Homes	344	10.4%	270	9.3%	-74.0	-21.5%	-1.1%
Emergency Shelter Homes	14	0.4%	1	0.0%	-13.0	-92.9%	-0.4%
Psychiatric Hospitals	23	0.7%	35	1.2%	12.0	52.2%	0.5%
Medical Hospital	90	2.7%	83	2.9%	-7.0	-7.8%	0.1%
Other	310	9.4%	321	11.1%	11.0	3.5%	1.7%
Total Number of Admissions	3306	100.0%	2892	100.0%	-414.0	-12.5%	0.0%
What Status Were They at Admission?							
Not Court Dependents	2187	66.2%	1922	66.5%	-265.0	-12.1%	0.3%
Court Returns	949	28.7%	889	30.8%	-60.0	-6.3%	2.0%
Respite Admissions	170	5.1%	80	2.8%	-90.0	-52.9%	-2.4%
Total	3306	100.0%	2891	100.0%	-415.0	-12.6%	0.0%
Where Did They Go?							
Parents Home	767	23.1%	505	16.6%	-262.0	-34.2%	-6.5%
Relatives	584	17.6%	388	12.8%	-196.0	-33.6%	-4.8%
Foster Homes	496	14.9%	501	16.5%	5.0	1.0%	1.6%
Group Homes	916	27.6%	978	32.2%	62.0	6.8%	4.6%
Emergency Shelter Homes	270	8.1%	307	10.1%	37.0	13.7%	2.0%
Psychiatric Hospitals			9	0.3%	9.0	***	0.3%
Medical Hospitals			2	0.1%	2.0	***	0.1%
Other Social Services	39	1.2%	2	0.1%	-37.0	-94.9%	-1.1%
Home of Friend	6	0.2%			-6.0	-100.0%	-0.2%
Per 3-5 Day Drop Procedure	187	5.6%	33	1.1%	-154.0	-82.4%	-4.5%
Other	57	1.7%	311	10.2%	254.0	445.6%	8.5%
Total Number of Releases	3322	100.0%	3036	100.0%	-286.0	-8.6%	0.0%